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APPLICANTS

Walter H. Olson, North Oaks, MN;

** CONTINUING DATA ***** *Mel*
This appln claims benefit of 60/428,400 11/22/2002

** FOREIGN APPLICATIONS ***** *Mel*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/18/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verifier and Acknowledged Examiner's Signature <i>Janice Heller Mel</i> Initials	STATE OR COUNTRY MN	SHEETS DRAWING 6	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 4
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ADDRESS

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TITLE

Subcutaneous implantable cardioverter/defibrillator

FILING FEE RECEIVED 1112	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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